

2011 MCC Registration Form,

Registration Date: Wednesday, July 13, 2011

Fees:*

(Please check the appropriate selection.)

CMS Member or staff

\$50.00 per person

Onsite CMS Member or staff

\$75.00 per person

Non-Member or staff

\$199.00 per person

Onsite Non-Member or staff

\$225.00 per person

* Fees include breakfast and lunch.

Names of Attendees:

(Please print.)

1) _____

2) _____

Method of Payment:

Please charge \$ _____ to my VISA MasterCard AMEX

Account # _____

Exp. Date _____

Signature _____

Check enclosed in the amount of \$ _____

Address 1 _____

Address 2 _____

City _____ State _____ Zip _____

Daytime Phone _____

Fax # _____

Email (required) _____

(Email address is only to be used for MCC registration confirmations and updates.)

Registration Information:

Send Payment To:

Chicago Medical Society (July MCC)

515 N Dearborn St., Chicago, IL 60654

Fax credit card payments to: **312-670-3646** or **Register Online: www.cmsdocs.org**

Questions? Visit www.cmsdocs.org or call 312-670-2550 x338

or email: emedrano@cmsdocs.org

Cancellations:

Individual cancellations must be received, in writing, by the CMS office no later than 48 hours prior to the activity date (7/13/11). Refunds will not be issued after 48 hours or for "no-shows."

Healthcare Information Technology (HIT) “How-To” Workshop Series

Making the transition and reaping the financial benefits!

The Electronic Health Record is transforming healthcare and is at the forefront of the industry as it relates to ARRA and Meaningful Use. This workshop series will consist of 3 programs that will cover the lifecycle of EHR transformation, how to prepare for the future, how to implement and optimize an existing EHR, ways to protect your investment and avert risk and how to achieve maximum financial benefits and incentives. Now more than ever, physicians need information about implementing EHR's as the American Recovery and Reinvestment Act begins offering financial incentives for physicians to implement HIT. The challenge for today's physician is how to effectively adopt EHR's in order to improve the quality of care in their medical practice, patient safety, and practice viability.

Hands-On Workshop Toolkit

Participants will receive several templates of self-help tools that will be developed and customized during these workshops. Some examples of these tools include the following:

- **Master Template/Sample Request for Proposal (RFP)**, RFP evaluation criteria, contracting requirements, including phased in payment schedules and other relationship management services.
- **Vendor Vetting Tools:**
 - Sample demo scripts
 - Sample score cards
 - Sample site visit check list
 - Sample cost comparison tool
- **Meaningful Use Assessment Tool**

American Recovery and Reinvestment Act – How to Leverage Stimulus Payouts (July Workshop)

The American Recovery and Reinvestment Act of 2009, aka “the Stimulus Bill,” signed into Law in February 2009 included \$19.2 Billion, which is intended to be used to increase the use of EHR by physicians and hospitals. This portion of the bill is called the HITECH ACT. The intended use of the \$19 Billion will be for incentive payments, grants, and loans. At the same time, the legislation presents new challenges to medical groups by expanding the privacy and security requirements of the Health Insurance Portability and Accountability Act (HIPAA). This session delivers information you need to get ready for big changes in healthcare, and specifically, how the adoption of Electronic Health Records (EHR) can transform healthcare while earning your practice dollars. This will bring you up to speed on where to begin with EHR adoption, how to start thinking about the process to ensure that you make the best purchasing and adoption preparations. This will also include special stipulations for critical access hospitals (CAHs).

Accountable Care Organization (ACO) Workshop: Understanding the Proposed CMS Regulations (July Workshop)

In March of 2011, the Department of Health & Human Service (HHS) released the proposed rule for Accountable Care Organizations (ACOs) which has created various challenges for physicians such as: identifying the direct and indirect benefits, determining how the ACO model will actually work, and developing long-term, strategic decisions that will be needed.

How to Optimize Vendor Performance and Negotiate a Performance-Based Contract (Fall Workshop)

Practices today are compelled to implement electronic medical (or computerized medical records) to improve clinical quality, enhance efficiency, and augment financial performance in their practices. However, discerning what vendor and system to select, based on the unique objectives of the practice, can be overwhelming given the many choices available. In some instances, making the right selection can be career defining. The investment and risk are both substantially high, and success with EHR can be challenging and time consuming. This session provides many helpful strategies for negotiating a rock solid contract that is a win for the practice and holds the vendor accountable for delivery of promises.

Implementation Strategies that Work (Fall Workshop)

Whether the objectives of attaining optimum clinical quality, practice efficiencies, and financial performance are achieved or not is directly tied to the strategy of the practice to obtain and use information technology to its highest attainable level. The practice leader must learn about information technology at the selection level, but also for understanding implementation and use of systems to generate real value.



Schedule & Topics for July 13

- 7:30 - 8:00 a.m.** **Registration & Breakfast**
- 8:00 - 9:30 a.m.** **The Patient Safety Education Project: Systems-Based Care Meets Professionalism**
by Martin J. Hatlie, JD, President, Partnership for Patient Safety (P4PS, Ltd.), Chicago, IL
- 9:30 - 10:00 a.m.** **Exhibits/Refreshment Break**
- 10:00 - 12:00 noon** **The ACO Workshop: Understanding the Proposed CMS Regulations**
Panel by Sue Hertlein, Jeffrey Daigrepoint & Max Reiboldt, CPA, President & CEO, Coker Group, Alpharetta, GA
- 12:00 - 1:00 p.m.** **CME Luncheon: Bridging the Patient Safety-Medical Liability Chasm**
by Timothy B. McDonald, MD, JD, Chief Safety & Risk Officer For Health Affairs, University of Illinois at Chicago
- 1:00 - 1:30 p.m.** **Dessert Reception in Exhibit Area**
- 1:30 - 3:45 p.m.** **The Health Information Technology (HIT) “How To” Workshop Series 1 of 3: Making the Transition, Improving the Quality of Care, and Applying for Financial Incentives**
by Jeffrey Daigrepoint, EFMP, CAPP, Senior VP of Coker Group, Alpharetta, GA
- 3:45 - 5:00 p.m.** **Training Your Staff to Increase Office Efficiency and Enhance the Patient Encounter**
by Sue Hertlein, Manager, Coker Group, Alpharetta, GA
- 5:00 - 6:00 p.m.** **Cocktail Reception: New Member Welcome!**
- 6:00 - 9:00 pm** **CMS Council & Annual Meeting**

EARN UP TO 8 CME CREDITS!

Target Audience:

All Physicians and their healthcare team will benefit from this CME activity, including Residents, Nurses, Physician Assistants, Hospital Administrators, and Practice Managers.

Desired Learning Outcomes:

The Patient Safety Education Project: Systems-Based Care Meets Professionalism

by Martin J. Hatlie, JD

At the conclusion of this learning activity, the participants should be able to:

- Deploy new skills and behaviors in their medical practice to improve communication with patients and families and reduce liability exposure.
- Change the norms in their practice setting to advance professionalism and systems-based practices that can reduce medical errors.

The Accountable Care Organization (ACO) Workshop: Understanding the Proposed CMS Regulations

Panel Members: Sue Hertlein, Max Reiboldt & Jeffrey Daigrepoint

At the conclusion of this learning activity, the participants should be able to:

- Assess the CMS ACO proposed requirements and their ability to meet the requirements.
- Apply knowledge gained about the quality and cost containment programs for the CMS ACO model to evaluate the shared savings program and determine if this structure could work for their organization.
- Identify the key elements of patient-centered care, care coordination and the focus on quality of care to Medicare beneficiaries and all patients to make effective decisions about their current environments.
- Adopt helpful tools and complete a check list to assess if they are ready to participate in an ACO.

CME Luncheon Keynote: Bridging the Patient Safety – Medical Liability Chasm

by Timothy B. McDonald, MD, JD

At the conclusion of this learning activity, the participants should be able to:

- Describe a comprehensive approach to patient harm and list the reasons why a focus on patient safety reduces liability.
- Identify opportunities to improve communication after harm or when near harm occurs.

The Healthcare Information Technology (HIT) “How To” Workshop Series 1 of 3: Making the Transition, Improving the Quality of Care, and Applying for Financial Incentives

by Jeffrey Daigrepoint, EFMP, CAPP

At the conclusion of this learning activity, the participants should be able to:

- Assess current healthcare information technology (HIT) legislation, standards, and how other organizations have successfully adopted HIT.
- Recognize where to begin with EHR adoption, including system qualifications and configurations, related penalties, and “how to” make the transition.
- Apply the latest HIT information to make effective decisions about EHR purchasing, adoption preparations, and quality care improvements.
- Perform a customized stimulus analysis to estimate your practice’s earning potential in federal incentives.

Training Your Staff to Increase Office Efficiency and Enhance the Patient Encounter

By Sue Hertlein

At the conclusion of this learning activity, the participants should be able to:

- Assess and prioritize their practice’s training needs and design a training program.
- Apply best practices and helpful tools for staff/patient interaction.

Speaker Disclosures

The following speakers do not have any relevant financial relationships with commercial interests: Timothy McDonald, MD, Max Reiboldt, CPA, Sue Hertlein, and Jeffrey Daigrepoint, EFMP, CAPP. Martin J. Hatlie, JD has disclosed that he receives a salary for employment services and profit distribution from P4PS, Ltd.

CME Disclosures, Accreditation & Designation Statements

The planning members of the Chicago Medical Society’s CME Planning & Executive Committee do not have any relevant financial relationships with commercial interests: David A. Loiterman, MD, President, Thomas M. Anderson, MD, Kenneth G. Busch, MD, Philip B. Dray, MD, Howard Axe, MD, Robert W. Panton, MD, William N. Werner, MD, MPH, William A. McDade, MD, MPH, Course Director, and Cecilia Merino, Director of Education. This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME). The Chicago Medical Society is accredited by the ACCME to provide continuing medical education for physicians. The Chicago Medical Society designates this live activity for a maximum of 8.0 *AMA PRA Category 1 Credit(s)*.™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.